

**Utah's Division of Child and Family Services**

# **Salt Lake Region Report**

## **Qualitative Case Review Findings**

**Reviews Conducted**

**October 20-23, 2014**

**November 17-20, 2014**

*A Report by*

*The Office of Services Review, Department of Human Services*

# **I. Introduction**

The FY2015 Salt Lake Region Qualitative Case Reviews (QCR's) were held the weeks of October 20-23, 2014 and November 17-20, 2014. Reviewers were selected from the Office of Services Review, the Division of Child and Family Services, community partners, and other interested parties. There were two out-of-state reviewers from the Federal Department of Health and Human Services. Reviewers also included individuals from the following in-state organizations and agencies:

- The Adoption Exchange
- Division of Substance Abuse and Mental Health
- Fostering Healthy Children
- Court Appointed Special Advocate (CASA)
- Salt Lake County Youth Services
- Division of Juvenile Justice Services
- Valley Mental Health
- Department of Human Services- Executive Directors Office
- Family Support Center

There were 40 cases randomly selected for the Salt Lake Region reviews (20 cases for each review). This is a reduction from the 50 cases that have been reviewed in past years. This adjustment was necessary in order to redistribute the number of cases reviewed in Northern and Western Region. The population of cases in Salt Lake Region, Northern Region and Western Region has shifted; therefore the distribution of the sample for each region was adjusted accordingly. The selected cases included 32 foster care cases and 8 in-home cases. All six offices in the region had cases selected as part of the random sample, which included the Metro, Mid Towne, Oquirrh, South Towne, Transition to Adult Living (TAL), and Tooele offices. A certified lead reviewer and shadow reviewer were assigned to each case. Information was obtained through in-depth interviews with the child (if old enough to participate), his or her parents or other guardians, foster parents (if child was placed in foster care), caseworker, teacher, therapist, other service providers, and others having a significant role in the child's life. Additionally, the child's file, including prior CPS investigations and other available records, was reviewed.

Staff from the Office of Services Review met with region staff on March 11, 2015 in an exit conference to review the results of the region's QCR. Scores and data analysis were reviewed and discussed with the region.

## II. Stakeholder Observations

The results of the QCR should be considered within a broad context of local or regional interaction with community partners. Each year the Office of Service Review interviews key community stakeholders such as birth families, youth, foster parents, providers, representatives from the legal community, other community agencies, and DCFS staff. On October 7-8, 2014, OSR interviewed individuals and groups of DCFS staff and community partners. DCFS staff members who were interviewed included the Regional Director, region administrators, supervisors, caseworkers, and support staff. Community partners interviewed included parental defense attorneys, several service providers for the refugee population, foster parents, mental health providers, and proctor family providers. Reports from these interviews were grouped into themes and categorized into the following: strengths, opportunities for improvement, somewhere in between (strength & improvement) and informational.

### PROVIDERS and COMMUNITY PARTNERS

#### Strengths

- In general, the staff is great.
- Caseworkers advocate for youth.
- Caseworkers make concerted efforts to preserve the placement of children.
- DCFS monitors contract providers to ensure accountability.
- The Proctor Provider Association is well supported by the members. The division does a great job of supporting the association by attending as frequently as possible.
- Partners see Teaming as an effective tool when intervening with families.
- There is effective sharing of information between the agency and the community partners.
- The Regional Permanency Team does a great job of focusing on permanency for youth.
- Partners support the region's efforts to employ the removal of children only as a last resort.
- Regional administrators are supportive of the efforts of the Quality Improvement Committee.
- The regional director is accessible and genuinely interested in hearing feedback and input and shares information in a timely manner.
- Information is shared with foster parents prior to placement. The Resource Family Consultant is the one who usually provides the foster parent with the information.
- Resource Family Consultants advocate on behalf of foster parents, and foster parents feel comfortable asking the RFC for support.
- Weekly case worker visits following the placement of the child in the foster home are helpful and appreciated.
- The pre-service training provided to foster parents is really good. In fact, foster parents recommend the training be provided to all parties.
- DCFS is doing great work and the initiatives pertaining to family preservation (vs removal) are philosophically supported by community partners.

- Several partners in the community have service models that are immediately available to the Division that would support the HomeWorks initiative.
- The Division supports the efforts of several refugee advocacy groups operating within the Salt Lake area. DCFS sends a representative to participate in collaborative meeting.
- There is effective communication between the refugee advocacy group and the division
- Some of the community partners are seeing the use of some of the Division's assessment tools (CANS) and are recognizing the value of these tools.
- The CPS Intake process has improved since the initial implementation of the Centralized Intake unit.
- The array of services in Salt Lake Valley surpasses the services available in other parts of the state.
- Experienced workers do a great job.
- DCFS does a great job of working with clients whose needs are "typical" but struggle when dealing with clients with exceptional needs (such as chronic, severe, complex or pervasive mental health issues and/or low functioning).
- Caseworkers seem to be more cognizant of the issues and approach to dealing with trauma.
- CPS workers are doing a better job of assessing threats of harm and taking action based on threats of harm rather than removing for reasons other than the existence of threats of harm.
- Substance abuse evaluations are being produced in a timely manner.
- The array of substance abuse treatment is adequate.
- Parents are routinely invited and encouraged to participate in Team meetings.
- The agency strives to assist families with transportation assistance as needed.
- Parental defense attorneys see the value of what caseworkers are trying to accomplish with families.
- Caseworkers generally strive to engage and communicate with incarcerated parents.
- Caseworkers generally strive to engage and communicate with non-custodial parents.

### **Improvement Opportunities**

- The process for establishing a contract with a provider is confusing, haphazard and lengthy.
- Post adoption services are scarce for youth with mental health needs who are in need of residential placement.
- There is a lack of resources for youth who require intensive, urgent and/or residential psychiatric services.
- Some children are coming into care in order to access resources.
- Some placement changes are last-minute, and there is insufficient attention given to adequately plan the transition.
- Residential providers report some instances where there are delays in transitioning a youth out of the residential program after DCFS has been notified of discharge.
- Some workers have to be reminded to invite the mental health partner to the Family Team Meeting.

- The process of billing Medicaid vs non-Medicaid services is confusing to providers.
- New kinship caregivers seem to struggle more due to several factors (new placement, lack sufficient understanding of the system) which could be ameliorated once they receive the new foster parent training.
- Some foster parents have taken it upon themselves to set up Family Team Meetings because they are not otherwise occurring.
- Invitations for Family Team Meetings to foster parents are extended sporadically.
- Discussing decisions is not always occurring in Family Team Meetings. Decisions are made prior to the meeting and then presented to the team.
- Foster parents would like to be invited to court hearings.
- Foster parent cluster groups are not scheduled at convenient times or locations.
- Foster parents request more services for children with Autism Spectrum Disorder.
- There are not enough Level-III foster homes.
- Some within the refugee advocacy groups see instances where some CPS cases are accepted for investigation while others are not and yet the circumstances seem similar. The decision to accept referrals seems arbitrary to the referent.
- Within the refugee population, there is distrust of the system (in general) which interferes with reporting, investigating and intervening.
- Services within the refugee community are reasonably available, but awareness of the array of services is relatively unknown.
- The poor pay and high caseloads leads to high turnover which then results in a less effective workforce and poor outcomes for families. This is especially frustrating when the best workers leave child welfare work.
- The results for psychological evaluations are not produced in a timely manner, and as a result the parent loses valuable time to work on reunification services. There appears to be an adequate number of evaluators in the community but it seems that the delay comes more from completing the assessment.
- There are inadequate services for youth and parents who struggle with complex, chronic, severe, emotional or developmental issues.
- The quality of services to the non-English speaking population varies. Some judges place greater emphasis on this issue which results in better case work.
- There is a concern that some caseworkers and Guardian ad Litem conspire to orchestrate outcomes that disadvantage the family.
- Parental defense attorneys desire to have more open communication with caseworkers but feel constrained by the fact that caseworkers are represented (by assistant attorney general counsel) and are prohibited by ethics and/or by instruction. But many feel like if there could be more liberal communication it would benefit the purposes of all parties.
- In some instances, caseworkers become single-minded once reunification seems unlikely, even when reunification is still the goal and the parent gets back on-track, it seems the case worker is no longer considering the possibility of reunification.
- Some partners feel that some staff use the family team meeting as a platform to reiterate the parent's failures.

- There is a presumptive attitude among many team members that parents must be perfect in order to have their children returned, when in fact, it may be that a parent can be just “good enough” to obtain reunification.
- There is not enough parent/child visitation provided.
- There need to be standardized benchmarks for workers/parents/children to determine when visitation can be expanded or when supervision is no longer necessary.
- DCFS is too strict when looking at kinship placement resources and the kin has some “hit” which is really old, insignificant or irrelevant to the care of the child.
- Court reports are not always provided in a timely manner to the parental defense attorney. This is only problematic when there are significant changes in the circumstances. When this is the situation, the attorney may request to postpone the hearing in order to prepare for this new development. This can result in delays in the case resolution.
- In cases where the child is served by DCFS and DJJS, the communication and collaboration between agencies is underpowered or there is team discord in terms of direction and priorities or there is confusion about who has the final say when making critical decisions.

### **Somewhere in-between**

- Child and Family Plans are being shared with partner providers, however some plans are vague and lack specificity in terms of provider expectations.
- Caseworkers are doing a great job of following up when the provider makes a request, but Caseworkers are less communicative until prompted.
- The quality of the service and experience depends on the worker.
- There are quality mental health services for children, but mental health evaluations are not provided in a timely manner.
- Some Caseworkers share plans with foster parents while others do not.
- The contracts do not always fit the situation, but the region and provider are usually able to work out a solution.
- It has been apparent to partners that the region is striving to promote family preservation over foster care; however, there is a concern that some of these cases ultimately result in worsening conditions and eventual removal.
- The agency does a great job of providing clients with public transportation resources; however, clients may be careless and lose the pass.

### **Information**

- Many community partners believe that the needs of children and families are becoming increasingly more complex.
- Some proctor providers are very committed to promoting permanency work and strive to recruit adoptive homes, even though this will mean that families who adopt will no longer be a resource to the provider agency, and the agency will be in a constant state of recruitment.
- Several contracted providers in the community are already prepared to provide services to the home-based population once the HomeWorks initiative is implemented in the region.

- Many of these contracted providers are set up to receive many different forms of payment for services, including private pay/insurance, Medicaid, or state contract.
- Optum Health has set up a crisis response team who are available for urgent/emergency situations. The purpose of this team is to assess and triage the situation. As a result, fewer hospitalizations are required and services are more immediately available.
- There are several refugee resource groups in the Salt Lake area. These groups are willing to assist the division by accompanying caseworkers on home-visits or providing basic translation services on visits and some limited translation of some documents.
- There are about 600-700 refugee families working with one of the refugee resource groups.
- One refugee group has a mental health worker on staff.

## **DCFS ADMINISTRATORS, SUPERVISORS, CASEWORKERS and SUPPORT STAFF**

### **Strengths**

- Structured Decision Making (SDM) tools are being used more frequently and more effectively through all the program areas in the agency, particularly when determining the rate of case worker contacts.
- SDM tools are useful in providing staff with information on making critical decisions and taking action.
- There is an increased awareness of SDM tools among community partners.
- SDM tools are an improvement to tools that were used in the past (*Immediate Protection Safety Assessment & Risk Assessment* tools).
- The regional training team is very competent on training the SDM tools and is recognized in the region as experts on the subject.
- Caseloads are manageable.
- Training for newly hired employees is going really well. The trainers are doing a great job of preparing newly hired staff.
- Regional administration is using a deliberate approach in assigning cases to new workers.
- The region has formalized a process for tracking new staff from the hire date and throughout the training, mentoring, caseload assignment, probationary period and ongoing supervision. The process includes an evaluative phase for determining whether the agency and new hire are a good fit.
- Regional administration conducted (360°) surveys/evaluations with staff to gather information about how things are going. Staff appreciated this interest and efforts in this endeavor.
- The transition from Valley Mental Health to Optima went smoothly.
- The changes with the regional director and associate region director positions went smoothly.
- The collaboration between legal partners and regional administration is going well and all the parties are aware as new issues are identified.

- There are some private providers already in place to support the launch of the HomeWorks initiative.
- The regional administrative team has made concerted efforts to communicate expectations of contract providers from the onset of service request.
- Caseworkers receive support from within their own team and co-workers, which contributes to healthy morale.
- Caseworkers are making more concerted efforts to record educational and school information on home-based cases.
- When the Parental Defense Attorney is involved there is a greater level of attention from the case worker and the case seems to go more smoothly.

### **Improvement Opportunities**

- Communication between DCFS and the GALs could be improved.
- Some of the GALs have minimal involvement with the family or inconsistent attendance at the family team meetings but have strong opinions in court which tends to drive the case.
- Some GALs advocate for foster placements over kinship placements and promote adoption permanency strategies over reunification efforts.
- Some GALs seem to be operating on out-of-date case information. It seems the perception of the family is entrenched in the original CPS/removal situation and not based on the current situation.
- Staff, especially CPS, receive inconsistent counsel depending on which Assistant Attorney General is consulted.
- There has been “drift” in terms of fidelity to the Structured Decision Making guidelines.
- SDM programming in SAFE needs to be expanded so that the tools can be linked from CPS cases to the on-going services case.
- Some judges are skeptical about trusting the recommendations of the SDM tools.
- Staff is more overwhelmed by the documentation requirements than by the caseload.
- More research could be completed at the Centralized CPS Intake process; for example, verifying address information, verifying active utilities, and collecting school information.
- There are inconsistencies between regions within the Division with regards to the management of adoption subsidies.
- The Adoption Subsidy forms do not match adoption policy.
- There are few resources when latency aged, sex-offender treatment is required.
- Some children are removed from parents or are placed in care by parents in order to access resources.
- Caseworkers receive inconsistent or conflicting instructions. For example, workers are told to write the plan in common terms for the family but then told the plan is a legal document so it must use legalese.



- Not all staff is comfortable with their understanding of the expectations pertaining to Indian Child Welfare Act (ICWA). However, the ICWA specialist is very helpful.
- Responses from tribes can be slow.
- Staff requested training on Individual Education Plans (IEP).
- Unpaid provider fees from clients receiving Domestic Violence services can impede the work of the child welfare agency when information is withheld from the agency until fees are paid by the client.

### **Somewhere in-between**

- There has been turnover in the region but it has been manageable.
- Coordination with the Mexican Consulate has improved but is still inconsistent.
- Some staff are managing the demands of the job better than other staff.
- Throughout the child welfare community, the quality of the intervention varies depending on the investment of the worker, attorney, therapist, etc. In other words, some people do a great job and others do poorly, with the rest falling somewhere in between great and poor.

### **Information**

- The training of new staff includes splitting time between the classroom and the field. There have been differing approaches to splitting the time between the two conditions. One method includes alternating classroom and field work to every other day. The other method includes dividing the schedule in half, with half of the day in the classroom and the other half of the day in the field. For Salt Lake Valley Region splitting the day into halves is the preferred method.
- The region is using State Coordinated Contracts shared with DJJS in order to meet some service gaps.
- The fact that the region is the flagship region of the state and centrally located with the media, legislature, and metropolitan population puts the region in a highly scrutinized position.
- There is a perception that DCFS tends to be the “catch-all” or last resort for children who need service when the child is not eligible for any other agency’s service.
- It is difficult for the region to engage the parents of delinquent children in services, since the parent believes the child needs to be fixed and the parent has no part of the intervention. Many times, the outcomes are tenuous or unrealized when the environment is substantially unchanged.
- Some wonder whether the healthy economy and job market may lure some of the most prized staff away from child welfare practice.

### **III. Child and Family Status, System Performance, Analysis, and Trends**




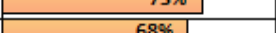






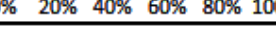
The QCR findings are presented in graphic form to help quantify the observations of the qualitative review. Graphs show a comparison of scores for past years' reviews with the current review. The graphs of the two broad domains of Child and Family Status and System Performance show the percent of cases in which the key indicators were judged to be "acceptable." A six-point rating scale is used to determine whether or not an indicator is judged to be acceptable. Reviewers scored each of the cases reviewed using this rating scale. The range of ratings is as follows:

- 1: Completely Unacceptable
- 2: Substantially Unacceptable
- 3: Partially Unacceptable
- 4: Minimally Acceptable
- 5: Substantially Acceptable
- 6: Optimal Status/Performance

Child and Family Status and System Performance are evaluated using 15 key indicators. Graphs presenting the overall scores for each domain are presented below. They are followed by graphs showing the distribution of scores for each indicator within each of the two domains.

## Child and Family Status Indicators

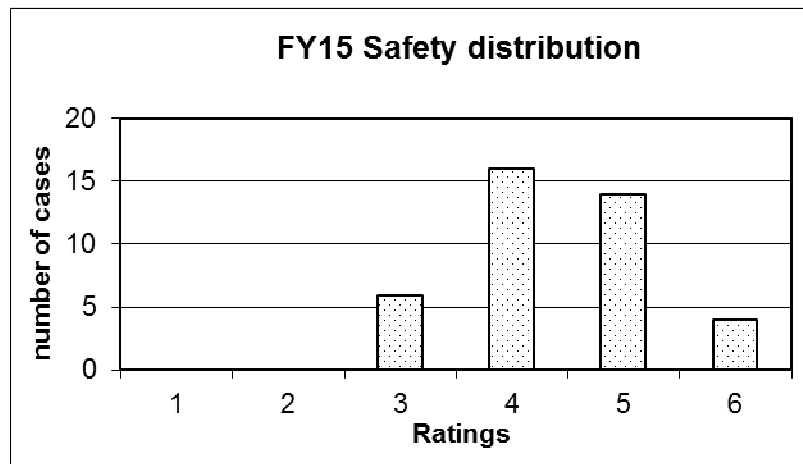
### Overall Status

Salt Lake Region	# of	# of	Standard: 70% on all indicators	FY11	FY12	FY13	FY14	FY15	Trends
	cases								
	(+)		Standard: Criteria 85% on overall score						
Safety	34	6		88%	90%	98%	96%	85%	Decreased but above standard
Child Safe from Others	39	1		93%	100%	100%	98%	98%	Decreased but above standard
Child Risk to Self or Others	35	5		92%	90%	98%	96%	88%	Decreased but above standard
Stability	29	11		88%	71%	76%	82%	73%	Decreased but above standard
Prospect for Permanence	27	13		58%	59%	57%	59%	68%	Improved but below standard
Health/Physical Well-being	39	1		100%	98%	100%	100%	98%	Decreased but above standard
Emot./Behavioral Well-being	35	5		88%	84%	92%	96%	88%	Decreased but above standard
Learning	35	5		83%	94%	92%	88%	88%	Decreased but above standard
Family Connections	17	5		na	81%	82%	82%	77%	Decreased but above standard
Satisfaction	35	5		90%	88%	94%	96%	88%	Decreased but above standard
<b>Overall Score</b>	<b>31</b>	<b>9</b>		<b>88%</b>	<b>86%</b>	<b>94%</b>	<b>92%</b>	<b>78%</b>	Decreased and below standard
			0% 20% 40% 60% 80% 100%						

## Safety

**Summative Questions:** Is the child safe from manageable risks of harm (caused by others or by the child) in his/her daily living, learning, working and recreational environments? Are others in the child's daily environments safe from the child? Is the child free from unreasonable intimidation and fears at home and school?

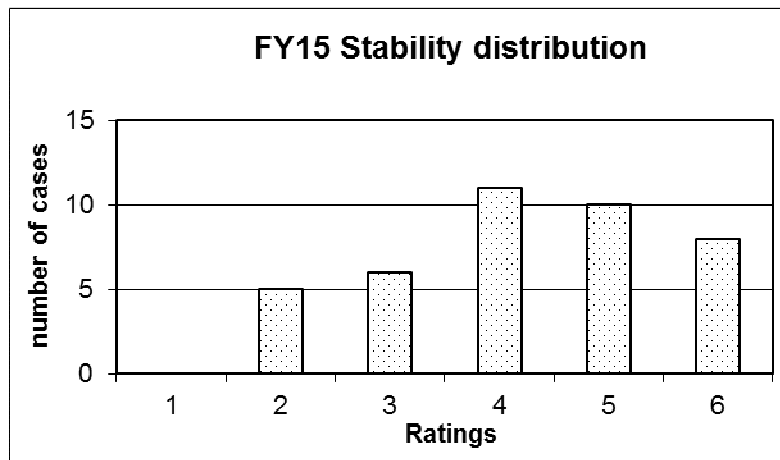
**Findings:** 85% of cases reviewed were in the acceptable range (4-6). This is a decrease from last year's score of 96% but still above standard. 85% is the lowest safety score for the region in five years. Five of the six safety concerns were due to the child's risk to harm self or others.



## Stability

**Summative Questions:** Are the child's daily living and learning arrangements stable and free from risk of disruption? If not, are appropriate services being provided to achieve stability and reduce the probability of disruption?

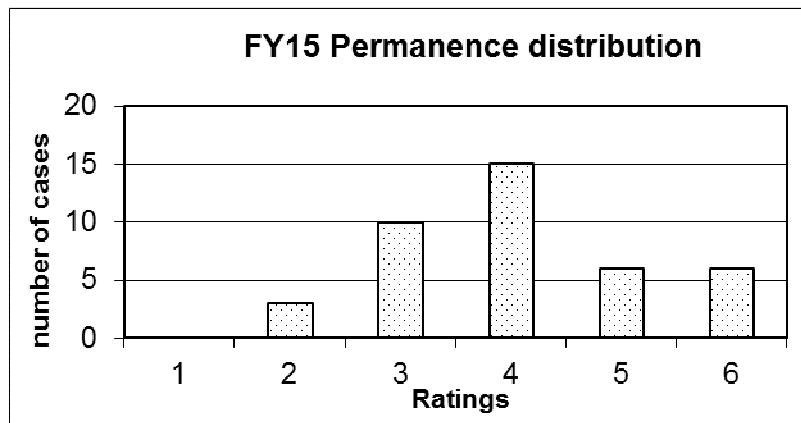
**Findings:** 73% of cases reviewed were in the acceptable range (4-6). This is a decrease from last year's score of 82%.



## Prospects for Permanence

**Summative Questions:** Is the child living in a home that the child, caregivers, and other stakeholders believe will endure until the child becomes independent? If not, is a permanency plan presently being implemented on a timely basis that will ensure that the child will live in enduring relationships that provide a sense of family, stability, and belonging?

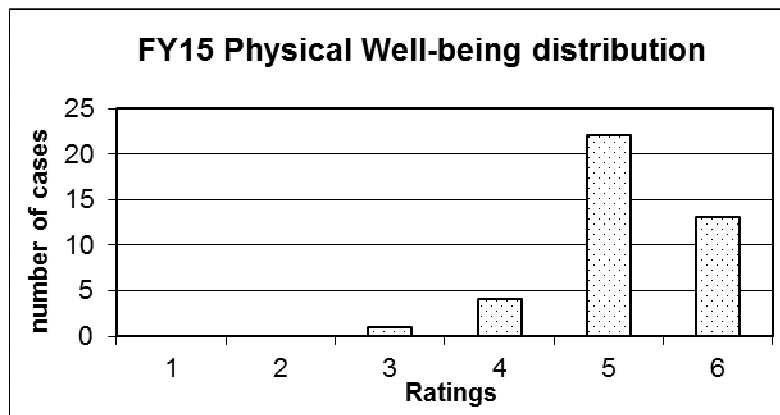
**Findings:** 68% of cases reviewed were within the acceptable range (4-6). This is an improvement from last year's score of 59%. 68% is the 5-year high score for the region and is equal to or above the state average for this indicator.



## Health/Physical Well-Being

**Summative Questions:** Is the child in good health? Are the child's basic physical needs being met? Does the child have health care services, as needed?

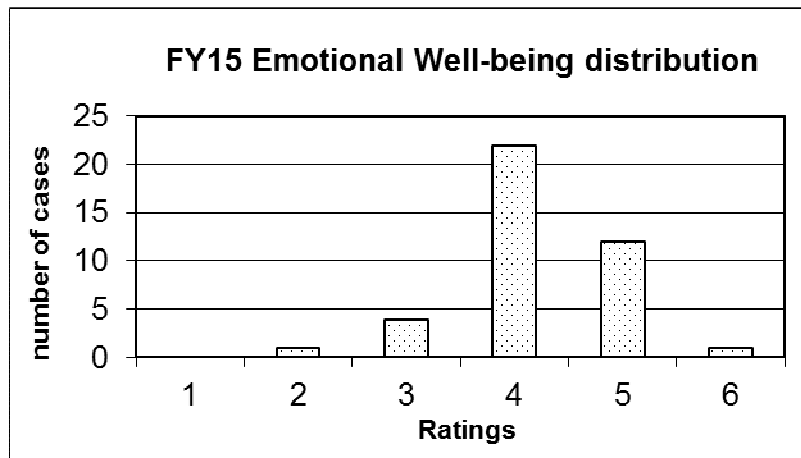
**Findings:** 98% of cases reviewed were in the acceptable range (4-6). This indicator has scored between 98% and 100% for the past five years.



## Emotional/Behavioral Well-Being

**Summative Questions:** Is the child doing well emotionally and behaviorally? If not, is the child making reasonable progress toward stable and adequate functioning, emotionally and behaviorally, at home and school?

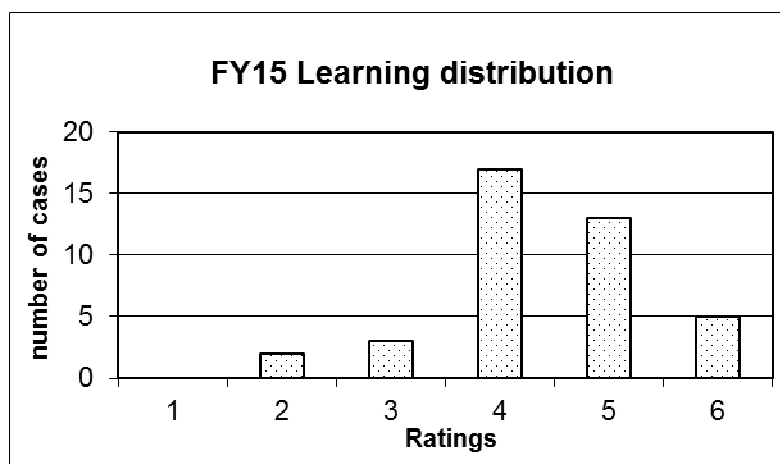
**Findings:** 88% of cases reviewed were within the acceptable range (4-6). This is a decrease from last year's score of 96%.



## Learning Progress

**Summative Question:** (For children age five and older.) Is the child learning, progressing and gaining essential functional capabilities at a rate commensurate with his/her age and ability? (Note: There is a supplementary scale used with children under the age of five that puts greater emphasis on developmental progress. Scores from the two scales are combined for this report.)

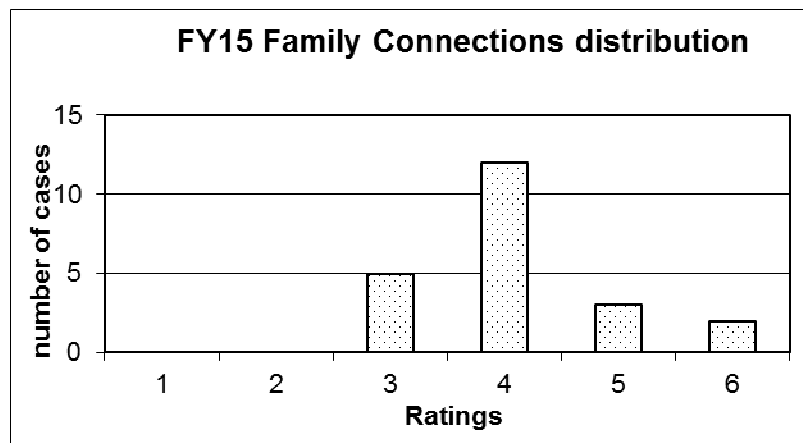
**Findings:** 88% of cases reviewed were within the acceptable range (4-6). There was no change from last year's score.



## Family Connections

**Summative Question:** While the child and family are living apart, are family relationships and connections being maintained through appropriate visits and other connecting strategies, unless compelling reasons exist for keeping them apart?

**Findings:** 77% of cases scored acceptable on Family Connections. This was a decrease from last year's score of 82%. The scores for "mothers" and "fathers" this year were 67% and 52% respectively. Scores for both "mothers" and "fathers" decreased this year from 84% and 71% last year. The score for "siblings" was only 86% based on seven cases in the sample. The score for "others" was 86% based on seven cases.

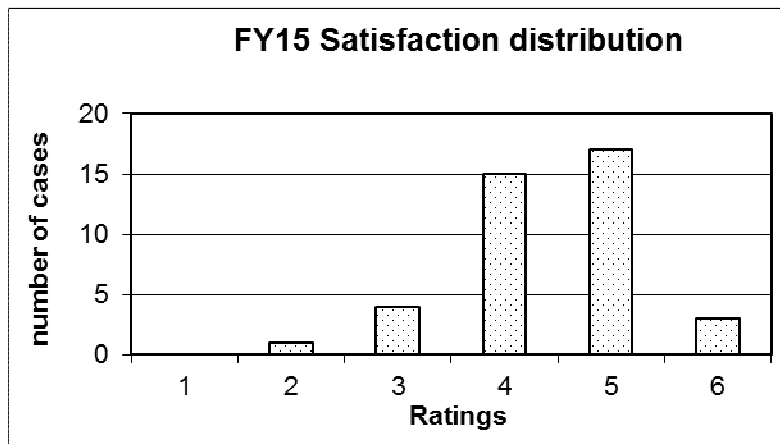


Family Connections	# of cases (+)	# of cases (-)	FY15
Overall Connections	17	5	77%
Siblings	6	1	86%
Mother	10	5	67%
Father	11	10	52%
Other	6	1	86%

## Satisfaction

**Summative Question:** Are the child, parent/guardian, and substitute caregiver satisfied with the supports and services they are receiving?

**Findings:** 88% of cases reviewed were within the acceptable range (4-6) on the overall Satisfaction score. This is a decrease from last year's score of 96% but above standard. Reviewers rated the satisfaction of children, mothers, fathers, and caregivers. Scores for the individual parties ranged from 100% for "others" to 74% for "caregivers."



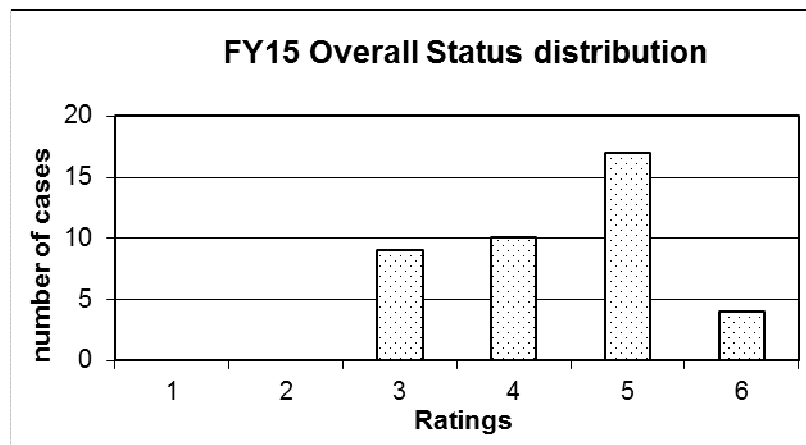
	# of	# of	
	cases	cases	
Satisfaction	(+)	(-)	FY15
Child	22	2	92%
Mother	18	4	82%
Father	9	2	82%
Caregiver	20	7	74%
Other	7	0	100%



## Overall Child and Family Status








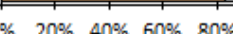
**Summative Questions:** Based on the Qualitative Case Review scores determined for the Child and Family Status indicators, how well are this child and family presently doing? A special scoring procedure is used to determine Overall Child and Family Status using the 6-point rating scale. In addition to scoring a 4 with this procedure, four of the first seven status indicators (minus Satisfaction) must score acceptable in order for the Overall Score to be acceptable. A unique condition affects the rating of Overall Child and Family status in every case: The Safety indicator always acts as a “trump” so that the Overall Child and Family status rating cannot be acceptable unless the Safety indicator is also acceptable.

**Findings:** 78% of cases reviewed were within the acceptable range (4-6). The overall Child and Family Status score declined from last year’s score of 92% and was below the minimum standard threshold of 85% for the Child and Family Status domain. In the nine cases that rated the unacceptable range, six cases failed due to safety concerns. One case failed safety due to the child being “at-risk” of being victimized by another; the other five cases failed safety because of the child’s behaviors (harmful behaviors towards self or others). The other three cases were below the acceptable threshold because more than half of the total number of indicators for the case scored in the unacceptable range.



## System Performance Indicators

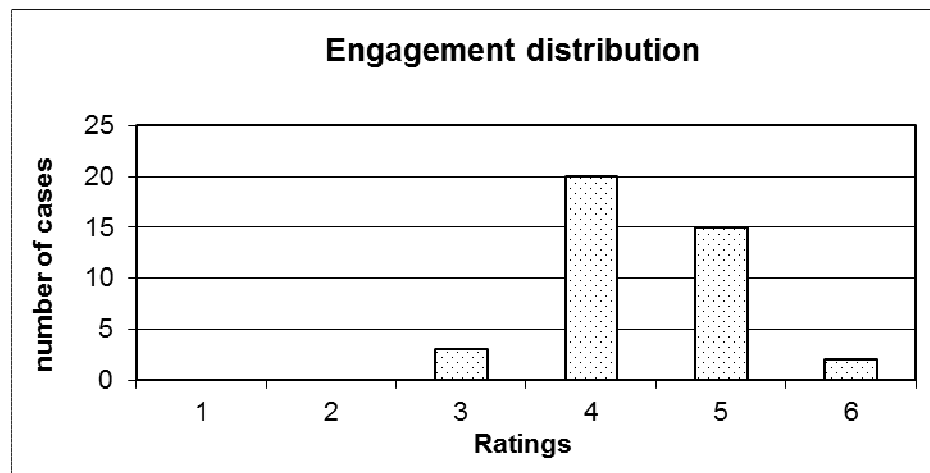
### Overall System

Salt Lake Region System Performance	# of cases (+)	# of cases (-)	Standard: 70% on all indicators	FY11	FY12	FY13	FY14	FY15 Current Scores	Trends
			Standard: 85% on overall score						
Engagement	37	3		76%	94%	92%	94%	93%	Decreased but above standard
Teaming	25	15		69%	65%	73%	73%	63%	Decreased and below standard
Assessment	34	6		63%	82%	80%	78%	85%	Improved and above standard
Long-term View	24	16		58%	73%	61%	73%	60%	Decreased and below standard
Child & Family Plan	35	5		61%	65%	65%	82%	88%	Improved and above standard
Intervention Adequacy	32	8		85%	84%	88%	90%	80%	Decreased but above standard
Tracking & Adapting	36	4		83%	88%	92%	96%	90%	Decreased but above standard
<b>Overall Score</b>	33	7		<b>83%</b>	<b>86%</b>	<b>88%</b>	<b>96%</b>	<b>83%</b>	Decreased and below standard
0% 20% 40% 60% 80% 100%									

## Child and Family Engagement

**Summative Questions:** Are family members (parents, grandparents, and stepparents) or substitute caregivers active participants in the process by which service decisions are made about the child and family? Are parents/caregivers partners in planning, providing, and monitoring supports and services for the child? Is the child actively participating in decisions made about his/her future?

**Findings:** 93% of cases reviewed were within the acceptable range (4-6). This is comparable to last year's score of 94% and far above standard. Separate scores were given for "child", "mother", "father" and "others". An overall score was then selected by the reviewer. There was a substantial decrease in the scores for mothers and fathers. Last year mothers and fathers scored 91% and 88% respectively. This year mothers and fathers dropped to 76% and 48% respectively.

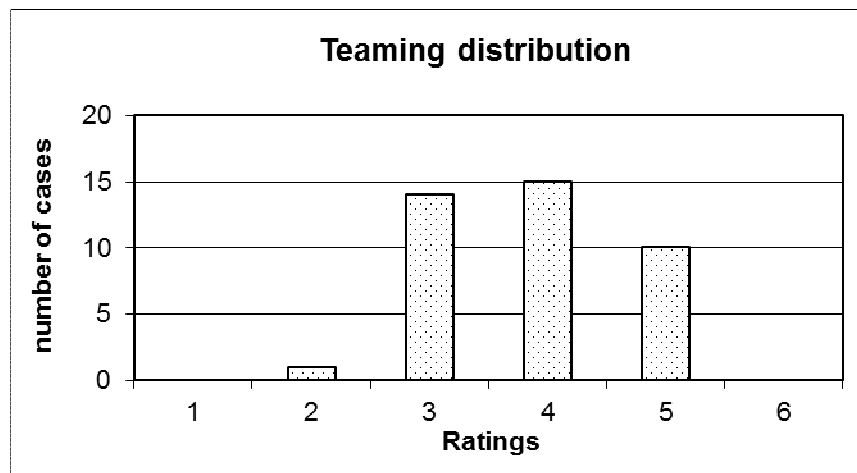


	# of cases	# of cases	
Engagement	(+)	(-)	FY15
Child	34	1	97%
Mother	22	7	76%
Father	10	11	48%
Other	15	4	79%

## Child and Family Teaming

**Summative Questions:** Do the people who provide services to the child/family function as a team? Do the actions of the team reflect a pattern of effective teamwork and collaboration that benefits the child and family? Is there effective coordination and continuity in the organization and provision of services across all interveners and service settings? Is there a single point of coordination and accountability for the assembly, delivery, and results of services provided for this child and family?

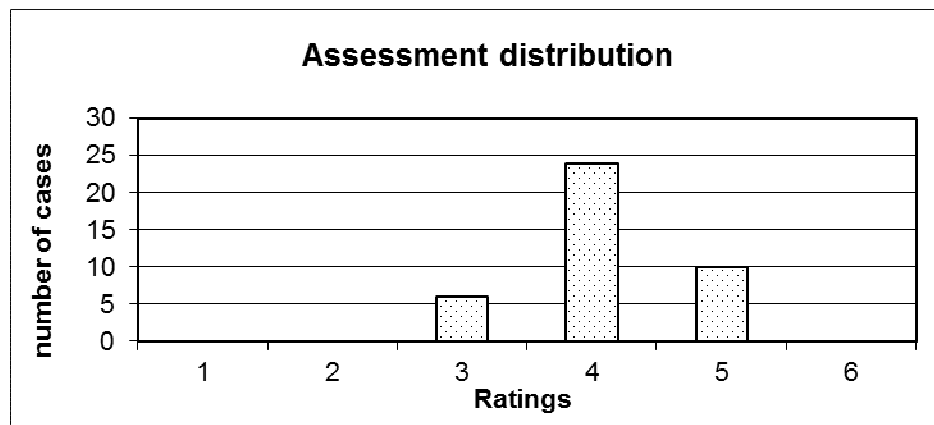
**Findings:** 63% of cases reviewed were within the acceptable range (4-6). This is a decrease from last year's score of 73% and below the standard of 70% for the indicator. 63% is a five year low for this indicator.



## Child and Family Assessment

**Summative Questions:** Are the current, obvious and substantial strengths and needs of the child and family identified through existing assessments, both formal and informal, so that all interveners collectively have a “big picture” understanding of the child and family and how to provide effective services for them? Are the critical underlying issues identified that must be resolved for the child to live safely with his/her family, independent of agency supervision, or to obtain an independent and enduring home?

**Findings:** 85% of cases reviewed were in the acceptable range (4-6). This is an increase from last year’s score of 78% and well above the 70% standard. Individual scores were given for this indicator. The highest scores were the Caregiver at 100% and Child scores at 93%. The “mother” and “father” scores were substantially lower at 69% and 56% respectively.

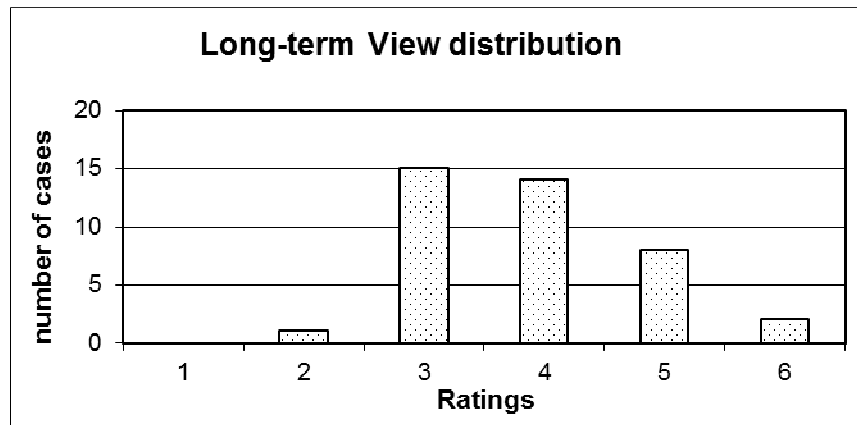


	# of cases (+)	# of cases (-)	
Assessment			FY15
Child	37	3	93%
Mother	20	9	69%
Father	14	11	56%
Caregiver	25	0	100%
Other	4	6	40%

## Long-Term View

**Summative Questions:** Is there an explicit plan for this child and family that should enable them to live safely and independent from the child welfare system? Does the plan provide direction and support for making smooth transitions across settings, providers and levels of service?

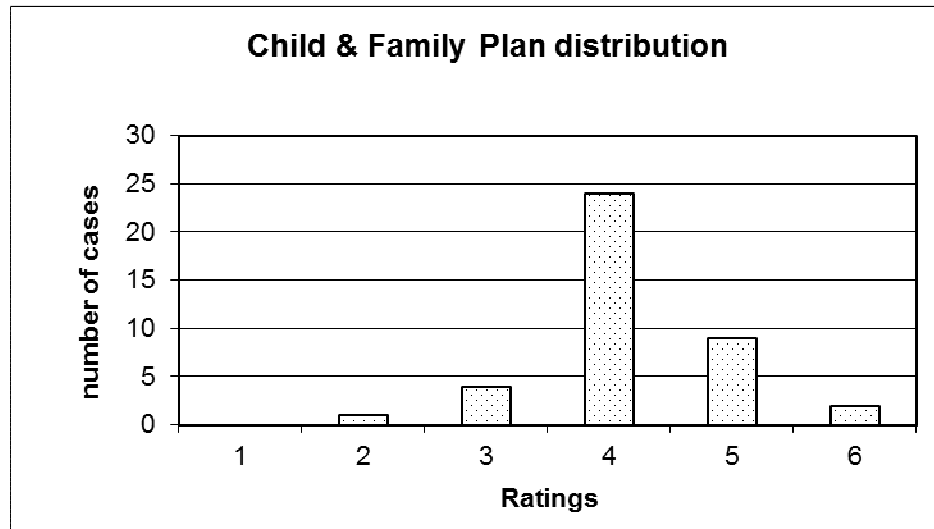
**Findings:** 60% of cases reviewed were within the acceptable range (4-6). This is a significant decrease from last year's score of 73% and below the standard of 70% for the indicator.



## Child and Family Plan

**Summative Questions:** Is the Child and Family Plan individualized and relevant to needs and goals? Are supports, services and interventions assembled into a holistic and coherent service process that provides a mix of elements uniquely matched to the child/family's situation and preferences? Does the combination of supports and services fit the child and family's situation so as to maximize potential results and minimize conflicting strategies and inconveniences?

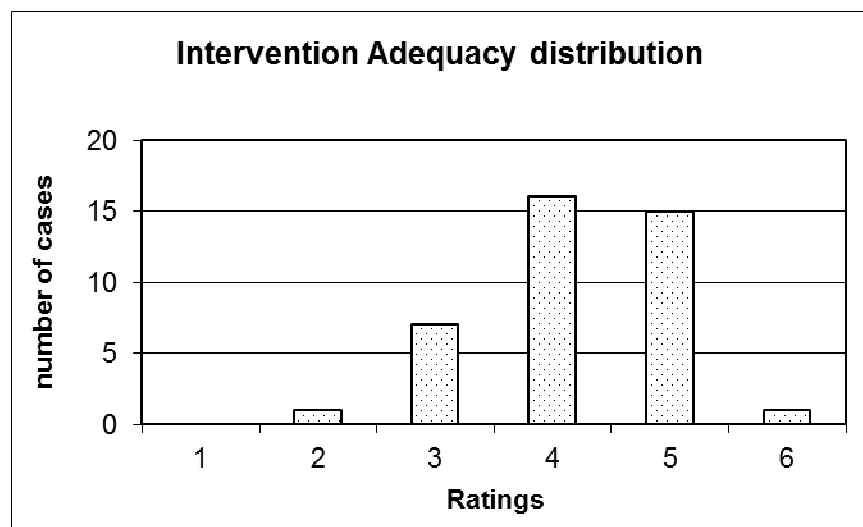
**Findings:** 88% of cases reviewed were within the acceptable range (4-6). This is an increase from last year's score of 82%.



## Intervention Adequacy

**Summative Questions:** Are the services and activities specified in the child and family plan 1) being implemented as planned, 2) delivered in a timely manner, and 3) at an appropriate level of intensity? Are the necessary supports, services and resources available to the child and family to meet the needs identified in the plan?

**Findings:** 80% of cases reviewed were within the acceptable range (4-6). This is a decrease from last year's score of 90% but above standard. This indicator was scored separately for Child, Mother, Father, and Caregiver. The scores for Child and Caregiver exceeded the Overall Score at 90% and 83% respectively. The score for "mother" was substantially lower at 67% while the score for "father" was 42%.



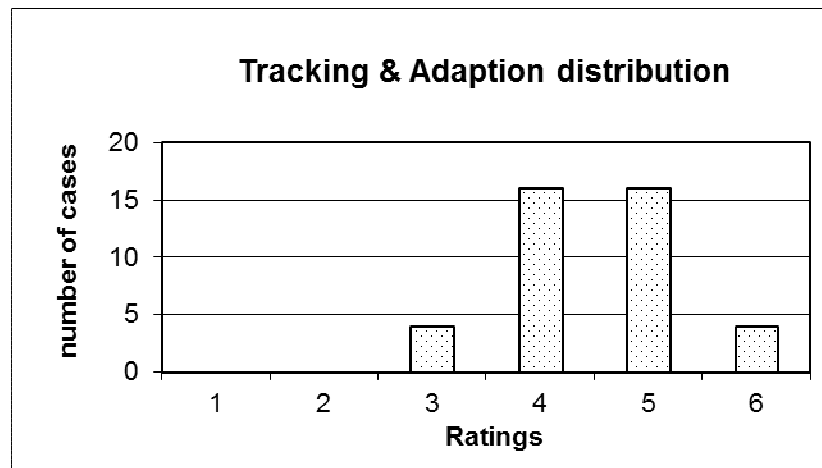
Intervention Adequacy	# of cases (+)	# of cases (-)	FY15
Child	36	4	90%
Mother	12	6	67%
Father	5	7	42%
Caregiver	5	1	83%
Other	23	3	88%



## Tracking and Adapting

**Summative Questions:** Are the child and family status, service process, and results routinely followed along and evaluated? Are services modified to respond to the changing needs of the child and family and to apply knowledge gained about service efforts and results to create a self-correcting service process?

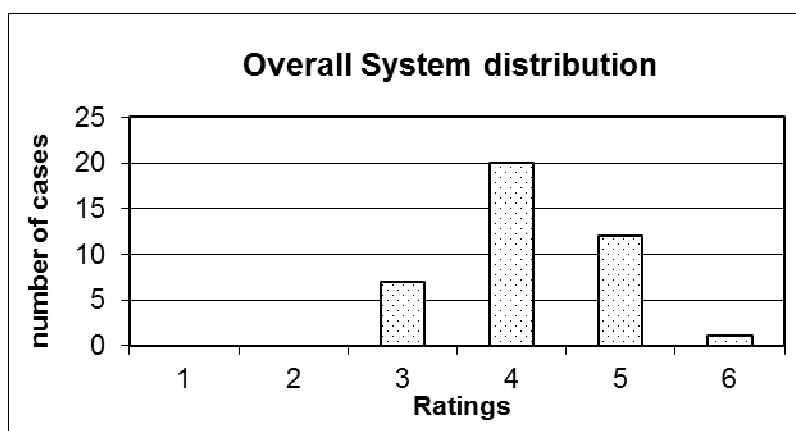
**Findings:** 90% of cases reviewed were in the acceptable range (4-6). This is a decrease from last year's score of 96% but above standard.



## Overall System Performance

**Summative Questions:** Based on the Qualitative Case Review scores determined for System Performance indicators, how well is the service system functioning for this child now? A special scoring procedure is used to determine Overall System Performance using the 6-point rating scale. In addition to scoring a 4 with this procedure, four of the seven system performance indicators must score acceptable in order for the overall score to be acceptable.

**Findings:** 83% of cases reviewed were within the acceptable range (4-6). The Overall System Performance score increased from last year's score of 96% and is below the standard of 85% for the overall.



## Outcome Matrix

The display below presents a matrix analysis of the service testing results during the current QCR. Each of the cells in the matrix shows the percent of children and families experiencing one of four possible outcomes:

- Outcome 1: child and family status acceptable, system performance acceptable
- Outcome 2: child and family status unacceptable, system performance acceptable
- Outcome 3: child and family status acceptable, system performance unacceptable
- Outcome 4: child and family status unacceptable, system performance unacceptable

The desired result is to have as many children and families in Outcome 1 as possible and as few in Outcome 4 as possible. It is fortunate that some children and families do well in spite of unacceptable system performance (Outcome 3). Experience suggests that these are most often either unusually resilient or resourceful children and families, or children and families who have some “champion” or advocate who protects them from the shortcomings of the system. Unfortunately, there may also be some children and families who, in spite of good system performance, do not do well (these children and families would fall in Outcome 2).

The outcome matrix for children and families reviewed during the Salt Lake Region review indicates that 70% of the cases had acceptable ratings on both Child Status and System Performance. This is a decrease from last year's outcome of 86%. There were four cases that rated unacceptable on both child status and system performance.

	Favorable Status of Child	Unfavorable Status of Child	
<b>Acceptable System Performance</b>	<b>Outcome 1</b> Good status for the child, agency services presently acceptable.  n= 28 70%	<b>Outcome 2</b> Poor status for the child, agency services minimally acceptable but limited in reach or efficacy.  n= 5 13%	83%
<b>Unacceptable System Performance</b>	<b>Outcome 3</b> Good status for the child, agency Mixed or presently unacceptable.  n= 3 8%	<b>Outcome 4</b> Poor status for the child, agency presently unacceptable.  n= 4 10%	18%
	78%	23%	

## V. Analysis of the Data

### RESULTS BY CASE TYPE

The following tables compare how the different Case Types performed on some key child status and core system performance indicators. There were two Family Preservation (PFP) cases in the sample. Teaming and Long-term View were below the indicator standard of 70% on all case types.

Case Type	# in Sample	Safety	Prospects for Permanence	Overall Child Status	Engagement	Teaming	Assessment	Long-Term View	Child and Family Plan	Intervention Adequacy	Tracking & Adapting	Overall System Performance
Foster Care SCF	32	81%	59%	72%	94%	66%	84%	59%	88%	88%	94%	84%
In-Home PSS	6	100%	100%	100%	83%	50%	100%	67%	83%	50%	83%	83%
In-Home PSC	0	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA
In-Home PFP	2	100%	100%	100%	100%	50%	50%	50%	50%	50%	50%	50%

Case Type	# in Sample	Stability	Prospects for Permanence	Overall Child Status	Overall System Performance
SCF	32	69%	59%	72%	84%
In-Home	8	88%	100%	100%	75%

## Delinquency Cases

Collection of demographic information regarding cases included in the case sample includes the question, “Did the child come into services due to delinquency instead of abuse and neglect?” Nine of the 40 cases reviewed (23%) were reported to have entered services due to delinquency rather than abuse or neglect. This percentage is an increase from last year (18%).

The following table compares how cases identified as Delinquency cases and Non-Delinquency cases performed on Stability, Permanency, Overall Child Status, and Overall System Performance. Delinquency cases had substantially poorer outcomes in Stability and Permanency, and they scored lower on Overall Child Status and Overall System Performance.

Case Type	# in Sample	Stability	Prospects for Permanence	Overall Child Status	Overall System Performance
Delinquency	9	44%	33%	44%	67%
Non-Delinquency	31	81%	77%	87%	87%

## RESULTS BY PERMANENCY GOAL

The following table compares how the different Permanency Goals performed on some key child status and core system performance indicators. There were six different Permanency Goal types represented in the case sample. Teaming and Long-term View are indicators which will require a regional Practice Improvement. According to the data, permanency goals which were most problematic to Teaming and Long-term View were Reunification, Remain Home, Individualized Permanency and Guardianship (Relative).

Permanency Goal	# in Sample	Safety	Prospects for Permanence	Overall Child Status	Engagement	Teaming	Assessment	Long-Term View	Child and Family Plan	Intervention Adequacy	Tracking & Adapting	Overall System Performance
Adoption	9	78%	78%	78%	89%	78%	89%	78%	100%	100%	100%	89%
Guardianship (Non-Rel)	1	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Guardianship (Relative)	2	100%	100%	100%	100%	50%	100%	50%	50%	50%	50%	50%
Individualized Perm.	4	75%	50%	75%	100%	75%	75%	50%	50%	75%	75%	75%
Remain Home	6	100%	100%	100%	100%	67%	83%	67%	83%	67%	83%	83%
Reunification	18	83%	50%	67%	89%	50%	83%	50%	89%	78%	94%	83%

## RESULTS BY CASEWORKER DEMOGRAPHICS

### Caseload

The following table compares how different caseload sizes performed on some key child status and core system performance indicators. Caseloads in the sample were divided into two categories: caseloads of 16 cases or less and caseloads of 17 cases or more. Of the workers in the sample, 34 out of 36 (94%) had caseloads of 16 cases or less. (Caseload size data was not reported in all 40 cases.) Teaming and Long-term View performed below the indicator standard of 70% regardless of caseload size. However there is a small number of cases (2) reviewed where the caseworker had case load of 17 or more cases.

Caseload Size	# in Sample	Safety	Prospects for Permanence	Overall Child Status	Engagement	Teaming	Assessment	Long-Term View	Child and Family Plan	Intervention Adequacy	Tracking & Adapting	Overall System Performance
16 cases or less	34	82%	65%	74%	94%	62%	85%	62%	85%	82%	91%	82%
17 cases or more	2	100%	50%	100%	50%	50%	100%	50%	100%	100%	100%	100%

### Worker Experience

The following table compares how Length of Employment as a caseworker impacts performance. Teaming and Long-term View scored below the indicator standard of 70%. New workers (6) the most seasoned workers (14) were below the Teaming and Long-term View indicator standard of 70%.

Length of Employment in Current Position	# in Sample	Safety	Prospects for Permanence	Overall Child Status	Engagement	Teaming	Assessment	Long-Term View	Child and Family Plan	Intervention Adequacy	Tracking & Adapting	Overall System Performance
Less than 12 Mos	6	83%	83%	67%	100%	50%	83%	67%	83%	67%	83%	67%
12 to 24 Mos	9	89%	100%	89%	89%	78%	89%	89%	100%	78%	89%	89%
24 to 36 Mos	4	75%	25%	50%	75%	75%	75%	50%	100%	75%	100%	75%
36 to 48 Mos	4	100%	50%	100%	75%	75%	100%	50%	100%	100%	100%	100%
48 to 60 Mos	2	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
60 to 72 Mos	1	100%	0%	100%	100%	100%	100%	0%	0%	100%	100%	100%
More than 72 months	14	79%	57%	71%	100%	43%	79%	43%	79%	79%	86%	79%

## RESULTS BY OFFICE

The following table compares how different region offices performed on some key Child Status and System Performance indicators. Cases from all six offices in the Salt Lake Region were selected as part of the sample. Teaming and Long-term View were below the indicator standard of 70% in four of the six offices in each indicator, indicating a region-wide problem. In fact no office met the minimum standard for both Teaming and Long-term View.

Office	# in Sample	Safety	Prospects for Permanence	Overall Child Status	Engagement	Teaming	Assessment	Long-Term View	Child and Family Plan	Intervention Adequacy	Tracking & Adapting	Overall System Performance
Metro	10	80%	80%	80%	100%	60%	80%	70%	90%	80%	90%	80%
Mid Towne	7	100%	71%	100%	71%	29%	86%	57%	71%	71%	86%	86%
South Towne	5	100%	80%	80%	100%	80%	100%	60%	80%	80%	80%	80%
TAL	8	63%	25%	50%	88%	63%	75%	38%	75%	75%	88%	75%
Tooele	2	100%	100%	100%	100%	50%	100%	100%	100%	100%	100%	100%
Oquirrh	8	88%	75%	75%	100%	88%	88%	63%	100%	88%	100%	88%

## RESULTS BY AGE

OSR looked at the effect of age on Stability, Permanency, Overall Child Status, and Overall System Performance. Upon further exploration of FY12, FY13, FY14 and this year's data, children ages 13-15 years tend to be the poorest performing age-group in stability and permanency.

FY15

Age	# in Sample	Stability	Prospects for Permanence	Overall Child Status	Overall System Performance
0-5 years	9	100%	89%	89%	78%
6-12 years	10	90%	90%	100%	100%
13-15 years	8	38%	50%	50%	75%
16 + years	13	62%	46%	69%	77%

FY14

Age	# in Sample	Stability	Prospects for Permanence	Overall Child Status	Overall System Performance
0-5 years	16	88%	81%	100%	100%
6-12 years	13	92%	69%	100%	92%
13-15 years	10	80%	40%	90%	100%
16 + years	10	60%	30%	70%	90%

FY13

Age	# in Sample	Stability	Prospects for Permanence	Overall Child Status	Overall System Performance
0-5 years	14	86%	86%	100%	86%
6-12 years	14	71%	50%	100%	86%
13-15 years	10	60%	20%	90%	100%
16 + years	11	82%	64%	82%	82%



FY12

Age	# in Sample	Stability	Prospects for Permanence	Overall Child Status	Overall System Performance
0-5 years	13	92%	77%	100%	92%
6-12 years	11	73%	64%	82%	82%
13-15 years	13	54%	46%	77%	92%
16 + years	12	67%	50%	83%	75%

## SYSTEM CORE INDICATORS

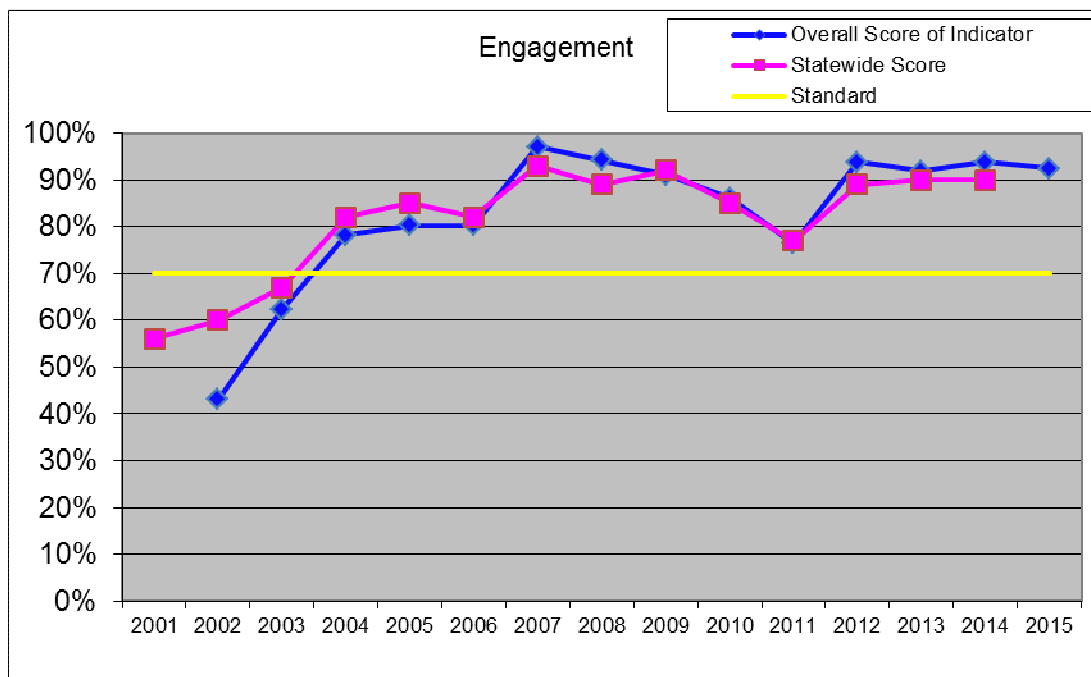
Below is data for all system indicators (Engagement, Teaming, Assessment, Long-term View, Child and Family Plan, Intervention Adequacy, and Tracking and Adaptation) over the last 15 years showing how the ratings of 1 (completely unacceptable), 2 (substantially unacceptable), 3 (partially unacceptable), 4 (minimally acceptable), 5 (substantially acceptable) and 6 (optimal) are trending within each indicator. The first chart for each indicator in the section below is an average of the scores for that indicator. The next chart and line graph represent the percentage of the indicator that scored within the acceptable range. The most ideal trend would be to see an increase in the average score of the indicator along with an increase in the percentage score. Statewide scores for FY2014 will not be available until the end of the year and therefore do not appear in the tables or charts.

There were improved scores in Assessment (78% to 85%) and Child & Family Plan (82% to 88%) and both are above the indicator standard of 70%. There was a slight decrease in Engagement (94% to 93%) but this is negligible and is likely due to the decrease in the sample size from 50 to 40 cases. There were decreases in Intervention Adequacy (90% to 80%) and Tracking and Adaptation (96% to 90%) but both remain above the indicator standard of 70%. There were decreases in Teaming (73% to 63%) and Long-term View (73% to 60%) and both are below the indicator standard of 70%.

## Child and Family Engagement

There were slight decreases in both the average and percentage scores for Engagement. However, the decrease in the percentage is likely due to the change in the sample size.

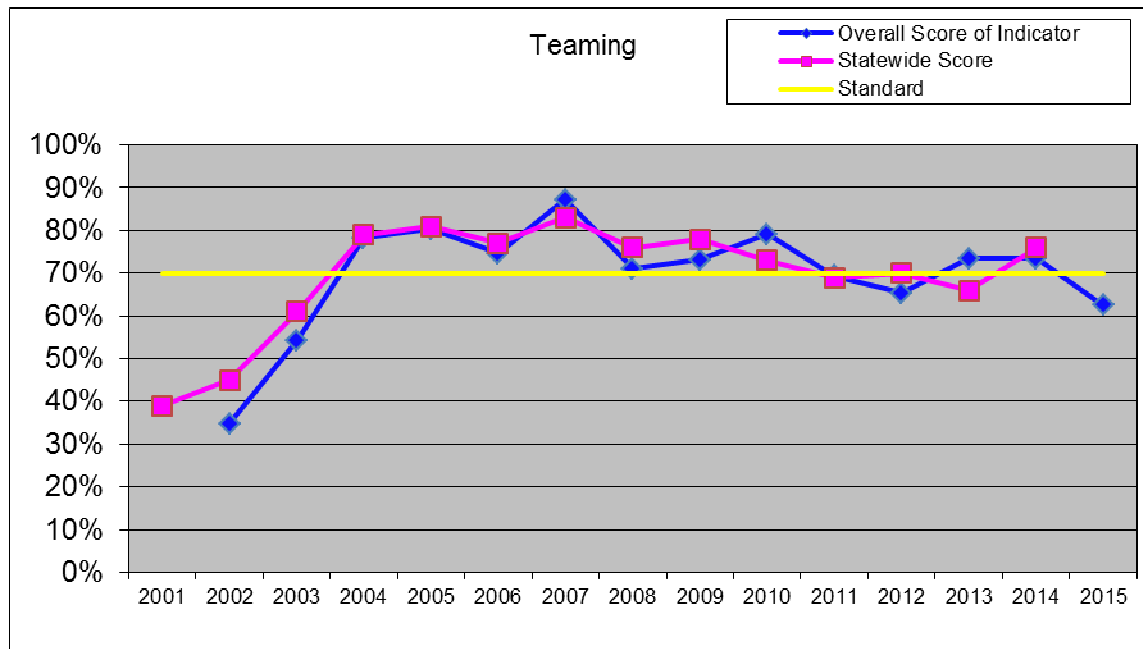
Engagement															
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Average Score of Indicator		3.35	3.67	4.33	4.32	4.37	4.57	4.36	4.36	4.39	4.21	4.41	4.49	4.51	4.40
Overall Score of Indicator		43%	62%	78%	80%	80%	97%	94%	91%	86%	76%	94%	92%	94%	93%
Statewide Score	56%	60%	67%	82%	85%	82%	93%	89%	92%	85%	77%	89%	90%	90%	



## Child and Family Team and Coordination

The Teaming score dropped below standard for first time in two years. The average score declined from last year's average.

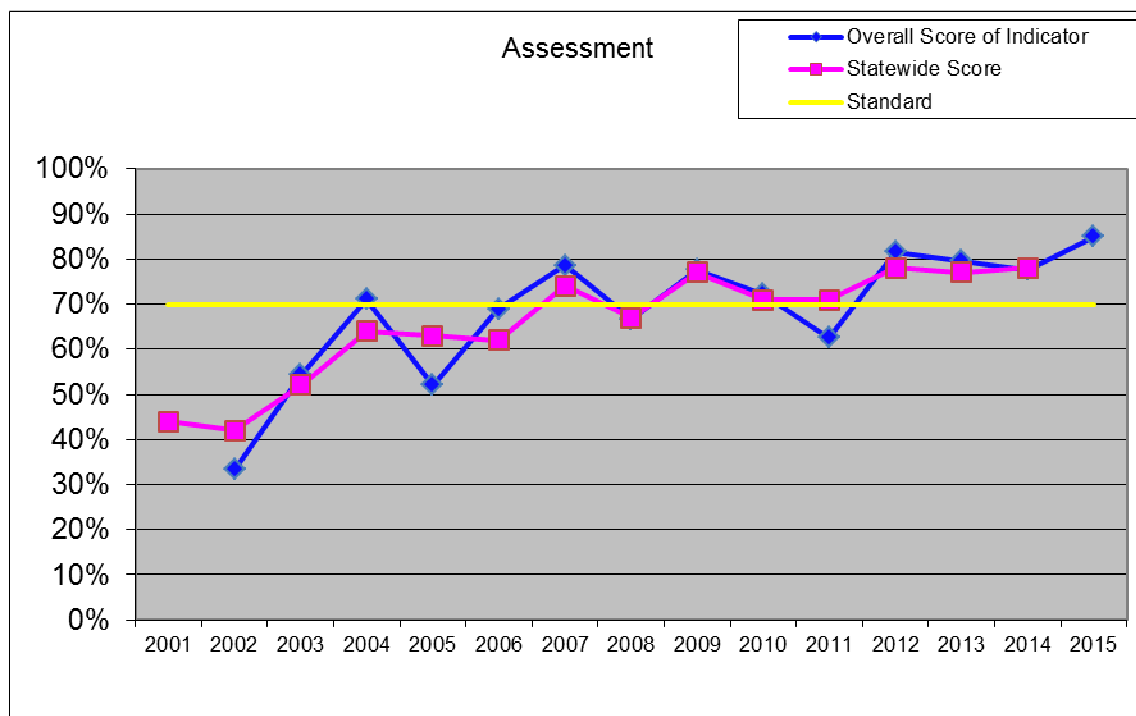
Teaming															
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Average Score of Indicator		3.06	3.64	4.22	4.25	4.03	4.33	3.96	4.07	4.17	4.06	3.98	4.08	3.98	3.85
Overall Score of Indicator		35%	54%	78%	80%	75%	87%	71%	73%	79%	69%	65%	73%	73%	63%
Statewide Score	39%	45%	61%	79%	81%	77%	83%	76%	78%	73%	69%	70%	66%	76%	



## Child and Family Assessment

As indicated in the line chart below, the Assessment indicator experienced a significant increase in the percentage score; however, the average score decreased slightly. The region percentage score exceeded the statewide score for the last several years and is likely to do so again in 2015.

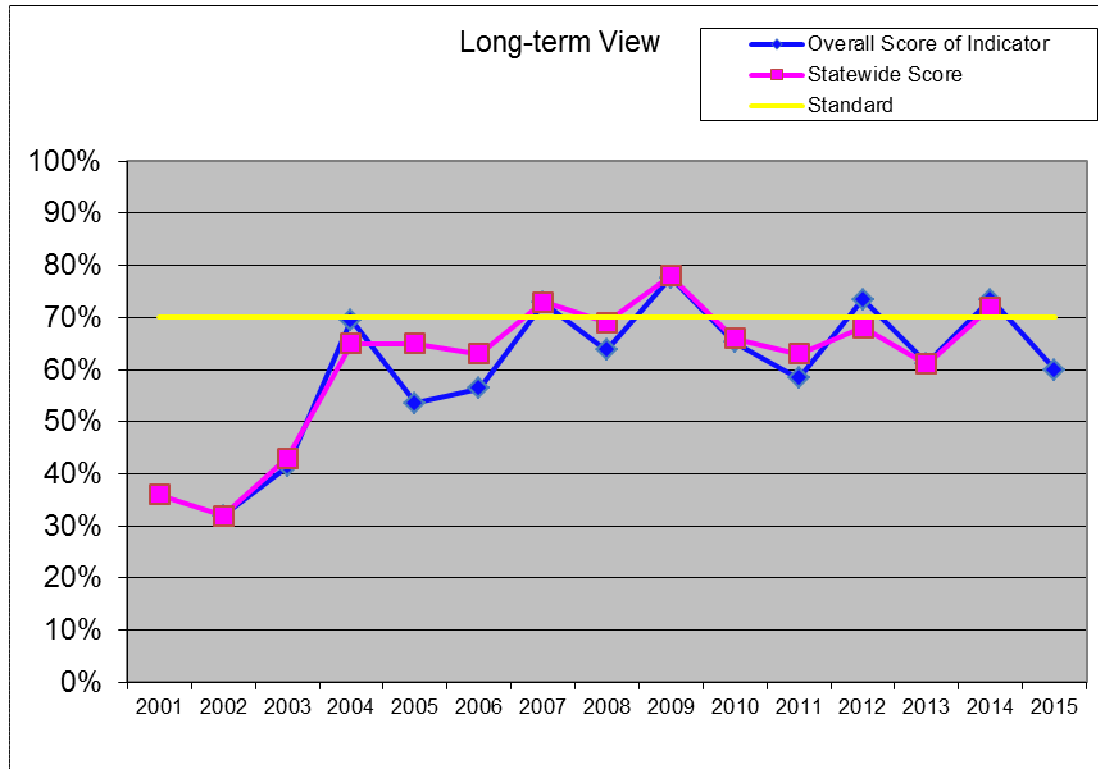
Assessment															
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Average Score of Indicator		3.07	3.53	4.03	3.72	3.85	4.14	3.86	4.07	4.04	3.85	4.00	4.06	4.16	4.10
Overall Score of Indicator		33%	54%	71%	52%	69%	79%	67%	78%	72%	63%	82%	80%	78%	85%
Statewide Score	44%	42%	52%	64%	63%	62%	74%	67%	77%	71%	71%	78%	77%	78%	



## Long-Term View

The Long-term View dropped below standard with the percentage score of 60%. The average score also declined.

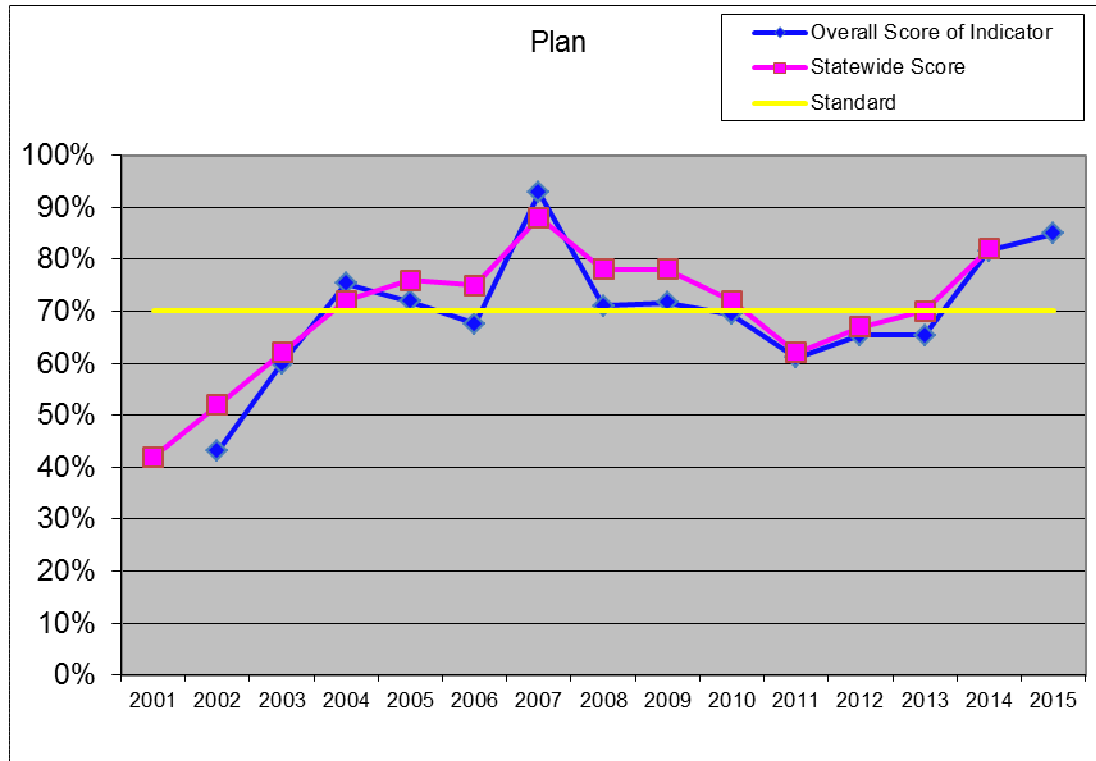
Long-Term View															
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Average Score of Indicator		2.88	3.30	4.00	3.70	3.76	4.00	3.96	4.07	3.90	3.72	3.92	3.88	4.00	3.88
Overall Score of Indicator		32%	41%	70%	54%	56%	73%	64%	78%	65%	58%	73%	61%	73%	60%
Statewide Score	36%	32%	43%	65%	65%	63%	73%	69%	78%	66%	63%	68%	61%	72%	



## Child and Family Plan

The Child and Family Plan score increased from 82% last year to 88% this year. The average score also increased.

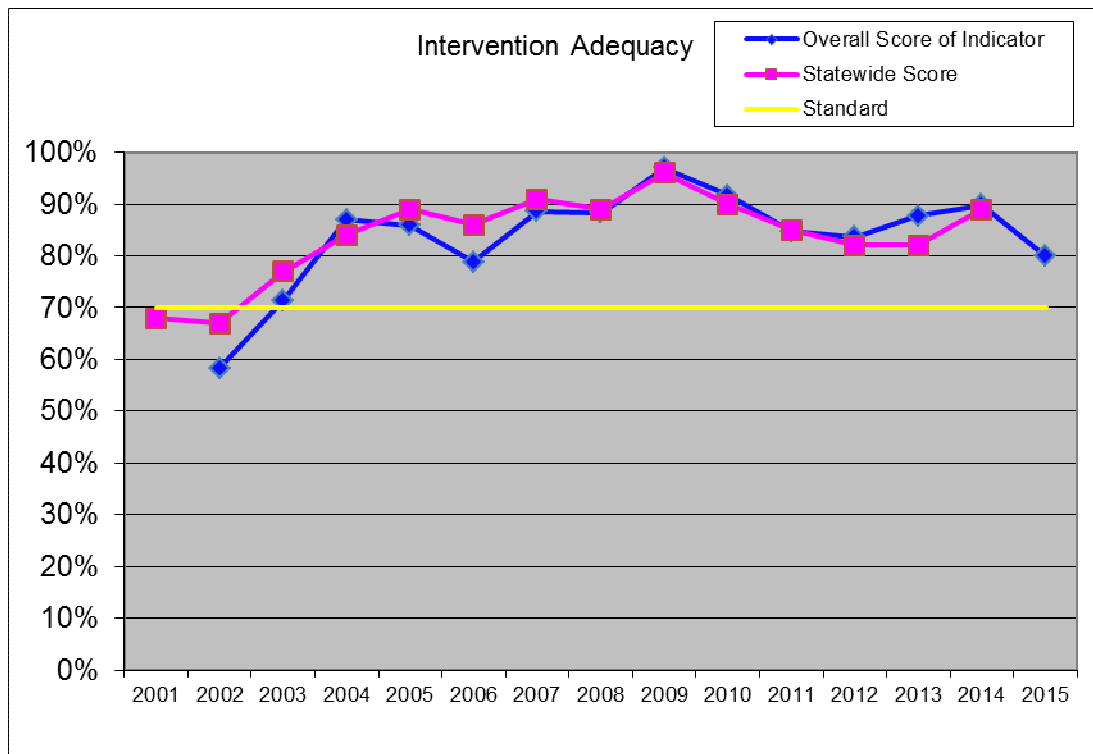
Child and Family Plan															
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Average Score of Indicator		3.35	3.53	4.09	3.99	3.96	4.36	3.93	4.03	3.97	3.78	3.78	3.88	4.10	4.15
Overall Score of Indicator		43%	60%	75%	72%	68%	93%	71%	72%	69%	61%	65%	65%	82%	85%
Statewide Score	42%	52%	62%	72%	76%	75%	88%	78%	78%	72%	62%	67%	70%	82%	



## Intervention Adequacy

Intervention Adequacy showed a decrease in the percentage score and a slight decline in the average score.

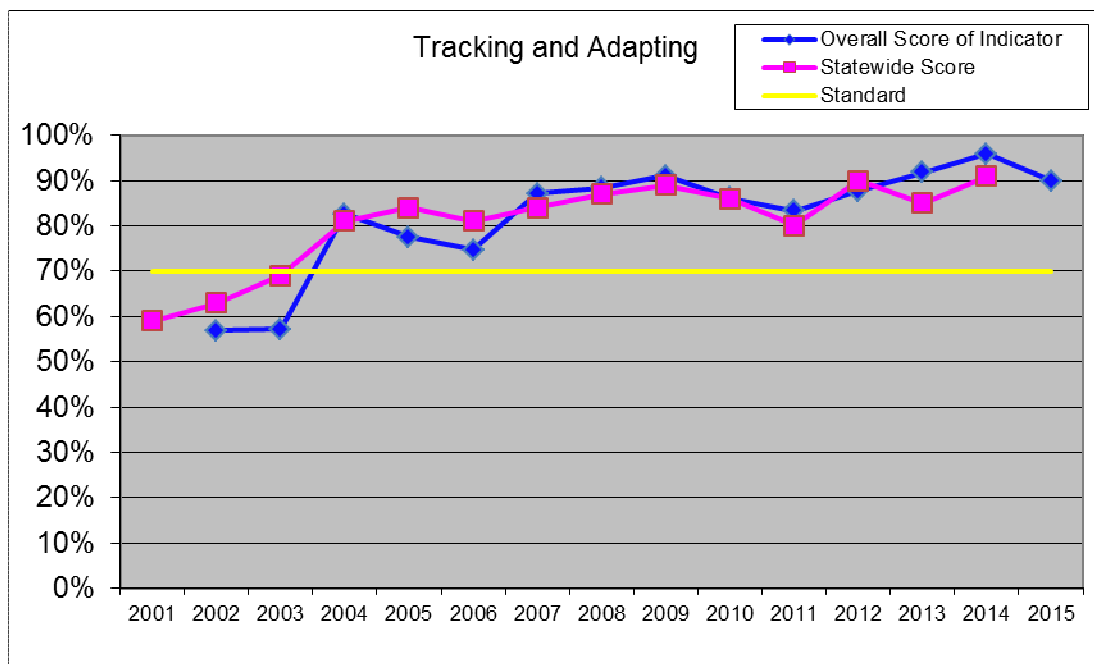
Intervention Adequacy															
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Average Score of Indicator		3.60	3.96	4.48	4.45	4.21	4.54	4.42	4.52	4.49	4.40	4.18	4.41	4.37	4.20
Overall Score of Indicator		58%	71%	87%	86%	79%	89%	88%	97%	92%	85%	84%	88%	90%	80%
Statewide Score	68%	67%	77%	84%	89%	86%	91%	89%	96%	90%	85%	82%	82%	89%	



## Tracking and Adapting

The Tracking and Adapting score also showed a slight decrease in the percentage score with a slight decline in the average score.

Tracking and Adaptation															
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
Average Score of Indicator		3.72	3.86	4.48	4.28	4.18	4.50	4.39	4.57	4.50	4.39	4.49	4.61	4.55	4.50
Overall Score of Indicator		57%	57%	83%	77%	75%	87%	88%	91%	86%	83%	88%	92%	96%	90%
Statewide Score	59%	63%	69%	81%	84%	81%	84%	87%	89%	86%	80%	90%	85%	91%	





## **V. Summary and Recommendations**

### **Summary**

During the FY2015 Salt Lake Region Qualitative Case Review (QCR), numerous strengths were identified about child welfare practice in the Salt Lake Region. It is clear that there is significant commitment and hard work devoted to ensuring the safety and well-being of the children and families.

The Region dropped below the 85% standard for Overall Child Status with a score of 78%. Six cases had an unacceptable score on Safety, resulting in a Safety score of 85%. This is the lowest score on Safety in five years for the region. Six of the other seven Child Status indicators scored above the 70% standard with scores ranging from 73% on Stability to 98% on Health/Physical Well-being. Prospects for Permanence continued to be the most challenging status indicator as it scored 68%. However, 68% represents a five-year high for the region for this indicator. The Safety score (85%) exceeded the Overall Child Status score (78%) meaning three of the cases had unacceptable status on a majority of indicators other than Safety.

FY15 results of 83% on the Overall System Performance matches the lowest score for the last five years (FY11). 63% on Teaming was the lowest performance rate in five years. 60% on Long-term View was the second lowest performance rate in the past five years. Both Teaming and Long-term View failed to meet the standard of 70% for the indicator. Intervention Adequacy and Tracking & Adaptation both decreased but were above standard. Child and Family Plan and Assessment were well above standard and exceeded the previous scores over the past five years.

### **Recommendations**

It is recommended that the Salt Lake Region use the 40 case stories as part of their ongoing effort to improve the services provided to children and families. The case stories could be used to help sustain performance that is above standard and elevate performance that is below standard. Review of the case stories in which the indicators scored substantially well or optimal could be used as examples in an effort to help duplicate great work. Careful review of the case stories regarding the circumstances that resulted in the unacceptable ratings could be beneficial in formulating practice initiatives, training opportunities or specific supervision and mentoring strategies to address those challenges.

Upon closer inspection of the data there are some areas of focus to apply practice improvement efforts.

#### Permanency Goal Type:

For Long-term View, the poorest performing goal types are Reunification (14 cases at 50%) and Remain Home (6 cases at 67%) which both permanency goals focus on returning or keeping children home.

Years of services:

One of the most significant aspects of the review was the performance by staff who has been employed for five years or more. This group represented the largest population in the sample with 14 of the 40 caseworkers falling into this category. More than half of the cases reviewed from this cohort were unacceptable.

Age of the child:

Stability was the most challenging for older youth but especially for youth ages 13-16.

Offices and Program Areas:

All office in the region struggled in either Teaming or Long-term View or both, meaning that the regional practice improvement plan should be applied equally in all offices and regardless of case type.

The Salt Lake Valley Regional Administration team has developed a Practice Improvement Plan which can be viewed at: <http://dcfs.utah.gov/pdf/reports/SLVPIP.pdf>